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When is it time to stop driving?

by Luciana Cramer, Care Specialist

In October 2003, 86 year old George Russell Weller, staring straight ahead and holding a firm-grip on the steering wheel, plowed his 1992 Buick Le Sabre through 1,000 feet of a crowded farmers market in Santa Monica, CA. Since then the debate over elder driving has intensified. The tragedy, one of the worst traffic accidents in U.S. history, left 10 people dead and 63 seriously injured.

Catastrophic accidents like Weller's are rare, but records show that fatality rates for drivers begin to climb after age 65. The rate of deaths involving drivers age 75 to 84 is about three per million miles driven – similar to teen drivers. Once they pass age 85, vehicular fatality rates jump to nearly four times that of teens. There are now over 2 million drivers in that category on our roads. The numbers will increase as our baby-boom population ages.

While most of the discussion surrounding elder drivers revolves around the issue of age, and since no one can come to a figure of how old is too old to drive, states have struggled to produce effective legislation to make our roads safer. In many states, older drivers are required to appear in person to renew their licenses.

Some form of medical evaluation is required in only 4 states (Maryland, Nevada, New Mexico and the District of Columbia). Road tests, which can be crucial in evaluating physical ability or mental awareness, are only required in Illinois and New Hampshire. In 18 states there are no restrictions at all.

A more productive approach would focus not on age, but on fitness. Normal aging does cause physical problems that may affect driving, such as diminished visual and auditory acuity, slower reflexes and lack of flexibility.

However, we all age at different rates, and even the onset of dementia occurs differently in every affected person.

Notwithstanding physical impairments caused by normal aging, dementia patients have



additional deficiencies in perception and visual processing; ability to pay attention for extended periods of time; ability to respond to multiple stimuli at once; ability to make correct judgments (such as which drivers have the right of way); and ability to react appropriately when pressured in a traffic situation.

Studies have shown that even though people in the early stages of dementia may be capable of driving under normal conditions, they have difficulty responding to new or challenging circumstances, and they are also at risk to becoming lost while driving. As dementia progresses into the middle stages, the ability to drive safely becomes highly compromised.

Until we have an implemented, more reliable system of evaluating driving fitness, it is left to drivers themselves, as a first level of defense, to evaluate their own driving abilities. A majority of older drivers decide by themselves to give up driving — over 600,000 a year, according to the American Journal of Public Health.

Dementia however, also compromises the ability of self-assessment, and most drivers with dementia fail to realize that their driving is unsafe. Consequently, drivers with Alzheimer's dementia often continue driving after they have been advised to stop or even after they have had a crash. If allowed to continue driving, 30 percent of drivers with dementia would have a crash under normal driving circumstances at

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Caregiver Tips

-  Reduce the need to drive by having medicines, groceries or meals delivered.
-  Transition driving responsibilities to others. Arrange for family members and friends to provide transportation.
-  Arrange a taxi service. Or use special transportation services for older adults.
-  Ask your physician to advise the person with dementia not to drive and write a prescription that says, "No driving."
-  Substitute his or her driver's license with a photo identification card.
-  Don't assume that taking away a driver's license will discourage driving. The person may not remember that he or she no longer has a license to drive or even that he or she needs a license.
-  Disable the car. Remove the distributor cap or the battery or starter wire. Ask a mechanic to install a "kill switch" that will prevent the car from starting unless the switch is thrown. Or give the person a set of keys that looks like his or her old set, but that don't work to start the car.

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the middle stages of the disease, as estimated by Researchers at Washington University in St. Louis. A cognitively impaired driver is also more likely to cause an accident without noticing it or becoming involved in it.

In 2009, 84-year old Lois Phillips was on her way to the dentist when she drove for several miles on the wrong way in the fast lane of I-95 in Philadelphia. Before being stopped by the police she had left a trail of chaos, causing 4 accidents as motorists swerved and scrambled to avoid hitting her. Mrs. Phillips' vehicle was unscathed and she did not even realize why she was being stopped. Fortunately, there were no fatalities in this case.

When self-assessment fails, the second level of defense is the driver's family, who can monitor driving abilities, evaluate fitness, and need to be ready to make the very tough decision of taking away the keys. While riding as passengers within the vehicle, family members should look for signs of unsafe driving such as driving too slow or stopping for no reason, making turns from the wrong lane, turning in front of other cars, backing up or changing lanes without looking back or checking mirrors. Unexplained dings and dents around the vehicle are clear indicators that driving is no longer safe.

The third level of defense is the doctor. In California, physicians are required by law to report disorders characterized by lapses of consciousness, as well as Alzheimer's disease and related disorders. Commercial drivers over 65 are required to pass an annual

physical to keep their licenses.

Car companies are also concerned about driving safety as we age. Many companies are studying and implementing features that make driving safer for older drivers, such as rear-view cameras and crash avoidance features.

Although the vast majority of accidents involving unfit drivers are minor fender benders, accidents with fatalities also occur in large numbers. Unfit driving is a matter of public safety and effective policies to better ensure drivers' fitness would closely resemble the criteria for commercial drivers in California.

But until we have those policies in place, it is up to each individual and the community to ensure safe driving. Don't hesitate to look for help if you suspect unsafe driving. The AARP offers a Driver Safety Program at sites around the country and online. Relatives and acquaintances may also request that the DMV review one's driving ability by completing a Request for Driver Reexamination (form DS 699) or writing to the local Driver Safety Office.

Driving in America is synonymous with independence and a measure of self-worth. Giving-up driving is reportedly the most difficult decision a person can make, and it will affect their whole way of life. Families and friends should be prepared to provide alternative ways of transportation and emotional support for when driving is no longer possible, to address feelings of lost autonomy or depression.



Tools:

- ◆ **Alzheimer's Association Dementia & Driving Resource Center:** alz.org/care/alzheimers-dementia-and-driving.asp
- ◆ **Easy Lift:** Providing Dial-a-Ride services for Santa Barbara South County - 805.681.1181.
- ◆ **SMOOTH:** Providing Dial-a-Ride services for Santa Barbara North County - 805.681.1181.
- ◆ **AARP Driver Safety Program:** aarp.org/home-garden/transportation/driver_safety/
- ◆ **AAA Interactive Driving Evaluation:** seniordriving.aaa.com/
- ◆ **Physician's Guide to Assessing and Counseling Older Drivers:** nhtsa.gov/people/injury/olddrive/OlderDriversBook/